## Commonwealth of Virginia Department of Alcoholic Beverage Control 2901 Hermitage Road Richmond, VA 23220

## **INVOICE #:**

Richmor	nd, VA	23220
<b>WINE</b>	INV	OICE

ABC Lic	ense No:						Date of Invoice:	:		
Wh	nolesaler:						Date Shipped:	Date Shipped:		
	Address:									
City/State/Zip:							How Shipped			
SOLD TO Retail License No:						7				
Retailer's Name:					Term	Terms- Cash on Delivery				
Ad	ddreess:									
City/S	City/State/Zip:						Salesman:	Salesman:		
NO. CASES	NO. BOTTLES	SIZE IN LITERS	CODE NUMBER		BRAND AND	) TYPE	TOTAL LITERS	CASE PRICE	TOTAL COST	
						ТОТ				
DATE:	O BE FILLE	ED IN BY R	RETAIL LIC	ENSEE)	Remarks:	(FOR USE BY	WHOLESALE LICENS	EE)		
	atod chare	wo beer	oived as d	noh.	1					
Goods as listed above have been received and cash in full paid therefor on the above date.				CA	SH CHECK C					
From:	(Name of Trar	nenortation C	(omnany)							
Signed:	n anno or mar						Ву:			

THIS COPY MUST ACCOMPANY THE MERCHANDISE, BE SIGNED BY RETAILER AND RETURNED AT ONCE TO THE DISTRIBUTOR. A COPY OF ALL TAX-EXEMPT INVOICES ARE TO BE FORWARD TO DEPT. OF A.B.C. BY THE DISTRIBUTOR UPON COMPLETION OF THE SALE.